

## Enhancing uptake of voluntary medical male circumcision (VMMC) services: Case based webinar series.

### Series 2: VMMC Safety- Making a safe Procedure even Safer.

#### A case-based discussion on lessons from management of severe adverse events.

Between 2008 and 2020, about 29.5 million men in East and Southern Africa had been circumcised for HIV prevention. Mathematical modelling estimates that 615,000 new HIV infections had been averted by the end of 2020. Experience from voluntary medical male circumcision (VMMC) programmes in the 15 priority countries in this region has shown high uptake among adolescent boys.

Safety with VMMC is a top priority as this intervention is undertaken for prevention purposes and overall, moderate, and serious adverse events have been maintained at a low level. The prevention and correct management of these events is important to avoid the adverse events in the first instance and if it occurs, to reduce long-term sequelae.

The rates of severe adverse events are very low. Recent reviews of PEPFAR's notifiable adverse event reporting system reveal that 100% of 36 glans injuries, and 97% of 38 fistulas occurred in clients under age 15 years. Whilst the rate of these severe adverse events is very low, WHO recommendations have been updated to recommend VMMC in adolescent boys and men from 15 years and above.

Given the surgical nature of VMMC, total elimination of adverse events is not possible. However, each adverse event is an opportunity for continuous improvement of VMMC program processes and practices to optimize treatment when complications arise and decrease the risk of similar events in the future. This webinar highlights specific case examples of severe adverse events with discussions with a panel of experts on considerations for management.

#### **Objectives of series**

This session has the following objectives:

- To present an overview of the WHO patient safety framework
- To share case descriptions of selected severe adverse events
- To discuss on considerations for optimized management of selected severe adverse events
- To engage partners and implementers as a community of practice to learn, share and provide actions and solutions to common issues.

[Join the webinar here.](#)

**Thursday, 27 April 2023**  
**1400hrs – 1600hrs CET/GVA**

### Agenda

<b>Webinar: VMMC safety – Making a safe procedure even safer (A case-based discussion on lessons from management of selected severe adverse events)</b>		
<b>Moderator: Tigistu Adamu, MD MPH, Chief Medical Officer, Jhpiego: Johns Hopkins University Affiliate</b>		
<b>Time</b>	<b>Topic</b>	<b>Presenter</b>
(2 hours)		
14.00 – 14.05 (5 minutes)	<b>Opening and housekeeping</b>	Wole Ameyan, WHO, Switzerland
14.05 – 14.15 (10 minutes)	Overview of Notifiable Adverse Events in VMMC Programs through 2020	Dr Todd Lucas U.S. Centers for Disease Control and Prevention, Division of Global HIV and TB, HIV Prevention Branch, Atlanta, GA, USA
14.15 – 15.00 (45 minutes)	<b>Case 1:</b> <i>Interactive case presentation: Recurrent Keloids.</i>  <b>Presented by Dr Tinashe Munyaradzi, Zimbabwe Community Health Intervention Research (ZiCHIRe), Harare Zimbabwe</b>  <i>10 mins - History / case</i>  <i>30 mins – Panel discussants gives opinion and rationale (6 mins each)</i>  <i>5 mins – responses and next steps by presenter</i>	<b>Expert panel discussants</b>  Dr. Dedan Ongonga, Paediatric surgeon, Ministry of Medical Services Kenya

**Webinar: VMMC safety – Making a safe procedure even safer (A case-based discussion on lessons from management of selected severe adverse events)**

**Moderator: Tigistu Adamu, MD MPH, Chief Medical Officer, Jhpiego: Johns Hopkins University Affiliate**

<b>Time</b>	<b>Topic</b>	<b>Presenter</b>
(2 hours)		
15.00 – 15.45 (45 minutes)	<p><b>Case 2:</b></p> <p><i>Interactive case presentation: Tetanus post-surgical MC</i></p> <p><b>Presented by Dr Blessing Mutede, Deputy Executive Director, Population Solutions for Health</b></p> <p><i>10 mins - History / case</i></p> <p><i>30 mins – Panel discussants gives opinion and rationale (6 mins each)</i></p> <p><i>10 mins – responses and next steps by presenter</i></p>	<p>Dr Pankaj Joshi, Kulkarni reconstructive surgery institute in Pune India</p> <p>Dr Karin Hatzold, Associate Director, HIV and TB, PSI Global</p> <p>Dr Zebedee Mwandu (Jhpiego regional)</p> <p>Dr Timothy Hargreave, Urological Surgeon, Edinburgh, United Kingdom</p>
15.45 – 15.50 (5 minutes)	<p><b>Lessons learned from consolidated Overview of Notifiable Adverse Events</b></p>	<p>Dr Todd Lucas</p> <p>U.S. Centers for Disease Control and Prevention, Division of Global HIV and TB, HIV Prevention Branch, Atlanta, GA, USA</p>
15.50 – 16.00 (10 minutes)	<p><b>Final reflections</b></p> <p><b>Wrap up</b></p>	<p><b>Moderator: Tigistu Adamu</b></p> <p><b>Wole Ameyan, WHO</b></p>

**End of session**

**Resources (links):**

Preventing HIV through safe voluntary medical male circumcision for adolescent boys and men in generalized HIV epidemics: recommendations and key considerations

<https://apps.who.int/iris/rest/bitstreams/1296029/retrieve>

Manual for male circumcision under local anaesthesia and HIV prevention services for adolescent boys and men. <https://www.who.int/publications/i/item/manual-for-male-circumcision-under-local-anaesthesia-and-hiv-prevention-services-for-adolescent-boys-and-men>

Improving surgical male circumcision practice – urethral fistula: diagnosis, first management and prevention. <https://www.who.int/publications/i/item/9789240019768>

Improving surgical male circumcision practice through experience: preventing urethral fistula. <https://www.who.int/publications/i/item/WHO-CDS-HIV-19.1>

New app to access WHO's voluntary medical male circumcision guidelines and resources <https://www.who.int/news/item/01-02-2021-new-app-to-access-who-s-voluntary-medical-male-circumcision-guidelines-and-resources>